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GOVERNOR

# State of Alabama Alabama Department of Correction

Research and Planning  
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Donal Campbell  
COMMISSIONER

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April 5, 2001

**ADMINISTRATIVE REGULATION**  
NUMBER 700

**OPR: FOOD ADMINISTRATION**  
(ACA Stndr: 2-4238, 40-44, 48-49, 51-53)

## **FOOD SERVICE ADMINISTRATION**

### **I. GENERAL**

The purpose of this regulation is to:

1. Establish policy, organization, responsibility and procedures for food service administration throughout the Alabama Department of Corrections (ADOC).
2. Ensure each inmate is provided a wholesome and nutritious diet, which meets nationally recommended dietary allowances (RDA), prepared under sanitary conditions and served in an appetizing manner.
3. Serve as a reference for efficient operation of food service in all facilities.

### **II. DEFINITIONS**

1. **Master Menu.** A master menu is prepared under the supervision of the Director of the Institutional Services Division. Verification and certification of the menu will be the responsibility of the Food Service Specialist and the assigned Registered Dietitian. The menu provides all recommended daily dietary allowances required by the Food and Nutrition Board, National Academy of Science. The menus are designed to be served at all institutions and work release centers, and provides uniformity in items served to each inmate.
2. **Therapeutic Diet.** A therapeutic diet is made available for medical reasons. A therapeutic diet order is furnished in writing to the Institutional Food Service Supervisor by the responsible health authority and rewritten monthly, as required. Therapeutic diets are planned and prepared with as little modification to the normal menu as needed to avoid unjustified budgetary burdens while giving full consideration to the inmate's therapeutic and nutritional needs.
3. **Religious Meals.** ADOC provides "a pork free menu" for those inmates whose religious

preference stipulates no pork. The menu is planned to be nutritionally adequate for those inmates who may be on Vegan diets due to religious preferences.

### **III. POLICY AND PROCEDURE**

The following governs operations of the food service function at all institutions and work release centers.

1. General Guidelines.

Normally, inmates shall be provided three meals per day, of which, at least two are hot meals, at a regular schedule during each 24-hour period with no more than 14 hours between evening meals and breakfast. However, two meals, which provide basic nutritional goals, may be allowed based on weekend/holiday food service demands.

2. Religious Meals.

The menu is planned with consideration to religious preferences, therefore, eliminating the need for menu substitutions.

3. Master Menu.

- A. The recommended Dietary Allowances of the National Research Council – National Academy of Science is the standard for preparation of the master menu.
- B. The 28-day cycle master menu will be used at all the facilities within the ADOC. The master menu will be reviewed annually by the ADOC Dietitian, Food Service Specialist and a representative group of food service supervisors. This review will be documented and maintained by the Food Service Specialist. Any additions or deletions to the menu will be based upon nutritional value, equipment capabilities, and staff determined inmate preferences. The menus will be reviewed quarterly by the Food Service Specialist to verify adherence to established basic daily servings and documented on the Steward's Worksheet.
- C. The master menu will be adhered to with exceptions only permitted after coordination with the Food Service Specialist. Fresh vegetables grown by institutions may be used as part of the lunch and supper meals. Chief Stewards will provide the Food Service Specialist with quantities and dates of fresh vegetables received using copies of delivery invoices and Steward's Worksheet.
- D. All inmates and staff shall consume meals prepared and served in accordance with the master menu in effect. Each staff member served at any dining facility will pay for those meals regardless of rank/status.

4. Sanitation and Maintenance.

- A. The ADOC Food Service Equipment Preventative Maintenance Manual contains clear, concise instructions for the operation and cleaning of the physical plant,

equipment and utensils. All food service/maintenance personnel will become thoroughly familiar with reference document.

- B. The Chief Steward will prepare and document a schedule for regular periodic cleaning of the physical plant, equipment and utensils.
- C. The Chief Steward, or his representative, will conduct a weekly inspection of all food service areas including dining/food service areas, and equipment. Results will be documented in the steward's log. On a daily basis refrigeration, water, and other critical control point temperatures will be checked and logged accordingly by on-duty food service personnel.
- D. Food Service will prepare a schedule of periodic preventive maintenance of the physical plant and equipment, developed in conjunction with maintenance personnel. The preventive maintenance program shall include as a minimum: inspection, lubrication, replacement of parts as necessary and any recommendations for extended equipment life as suggested by manufacturers instructions.
- E. Food Service personnel shall meet standards set in the Rules of Alabama State Board of Health, Environmental and Facility Standards Administration, Chapter 420-3-22 for Food Service Standardizations. All inmate personnel assigned will meet the same standards cited above and will be checked by the duty steward prior to the start of each shift.

5. Security.

- A. The Chief Steward shall assist security personnel in scheduling supervision of inmates during meal hours. Although direct supervision by staff members is required, regimentation should be minimal.
- B. Supervisory personnel are responsible for assuring that inmates working on the serving line show no favoritism to other inmates concerning portion control and are neat and clean in serving.

**IV. STANDARD FORMS.**

The following forms are designed to assist the Food Service Specialist in Food Service operations at institutions and work release centers. (All forms shall be filed in the office of the Food Service Specialist for a period of one year before discarding):

ADOC Number		Subject
1.	186	Daily/Weekly Meal Report. Report of total number of all meals served daily.
2.	103	Steward's Worksheet. Record of stewards production during each meal period.

3. 179 Inmate Lunch Request. Record of number of sack lunches prepared for inmates assigned to work away from the facility.
4. 180 Institutional Meal Evaluation Report. Record of individual designated by the warden/director of a facility to sample and record palatability and quality of foods prepared.

#### **IV. SUPERSESSION**

This regulation supersedes Administrative Regulation 700, dated June 24, 1985, as amended.

  
Donal Campbell, Commissioner

#### **ANNEXES**

Annex A	Plan "A" Food Service Facilities Available to Prepare Food
Annex B	Plan "B" Food Service Facilities Damaged; Preventing Food Preparation
Annex C	Inmate Feeding Institution Back-up Table

#### **SUMMARY OF CHANGES**

Updates the changes in the Health Code Standards and appropriate staff titles.

#### **PLAN "A"**

## **FOOD SERVICE FACILITIES AVAILABLE TO PREPARE FOOD**

1. If meals can be prepared at the affected institution, it will be accomplished in accordance with the master menu.
2. Replacements of any damaged raw foods will be certified by the Chief Steward to the Food Service Specialist.
3. The Food Service Specialist will provide replacements of damaged food; using standard food projections and issues.
4. At least one (1) additional Chief Steward will be placed at the affected institution during all food preparation and serving, to provide assistance.

## **PLAN “B”**

## **FOOD SERVICE FACILITIES DAMAGED; PREVENTING FOOD PREPARATION**

1. The Food Service Specialist will contact the back-up institution and provide instructions as to the number of meals required. (See Institution Back-Up Table).
2. All meals will be served in disposable containers during disturbances or emergencies.
3. Lunch meals will be either cold cuts or sandwiches, as directed by the Food Service Specialist.
4. Food will be transported in food transport containers by the back-up institution.
5. Stewards assigned to the institution having the emergency will be assigned, if required, to the back-up institution, if deemed necessary by the Warden, Food Service Specialist or the Director of the Institutional Services Division.
6. Food orders for the institution having the emergency will be delivered to the back-up institution and charged to the institution experiencing the emergency.
7. If disposable containers are needed and not available in institutions or the Institutional Services Division's warehouse, they will be purchased using emergency procedures by the Institutional Service Division.
8. At least one (1) Chief Steward from another facility will be available at the back-up institution to assist with the operation.
9. Upon resuming operations at the affected institution, the master menu meals for the day will be prepared.
10. Any food, (raw materials), at the back-up institution previously issued for the affected institution will be transported to that institution as soon as possible, after normal operations are resumed.

## **INMATE FEEDING**

ANNEX B TO AR 700

## INSTITUTION BACK-UP TABLE

<b><u>BACK-UP INSTITUTION</u></b>	<b><u>SUPPORTED INSTITUTION</u></b>
Holman CF and J.O. Davis CF	Fountain CF
Fountain CF and Atmore WR	Holman CF
Fountain CF and Atmore WR	J.O. Davis CF
Easterling CF and Bullock CF	Ventress CF
Ventress CF and Bullock CF	Easterling CF
Staton CF and Draper CF	Frank Lee Youth Center
Draper CF and Frank Lee Youth Center	Staton CF
Staton CF and Frank Lee Youth Center	Draper CF
Draper CF and Staton CF	Elmore CF
Kilby CF and Montgomery WR	Bullock CF
Draper CF and Tutwiler Prison for Women	Kilby CF
St. Clair CF and Decatur WR	Limestone CF
Kilby CF	Red Eagle Honor Farm
St. Clair CF and Birmingham WR	Donaldson CF
Donaldson CF and Birmingham WR	St. Clair CF
Staton CF, Kilby CF, and Red Eagle Honor Farm	Tutwiler Prison for Women
Donaldson CF, Draper CF, and State Cattle Ranch	Bibb County CF
Bibb County CF	State Cattle Ranch

ANNEX C TO AR 700

**STEWARD'S WORKSHEET  
FRONT PAGE**

<b>INSTITUTION:</b>		<b>MEALS</b>		<b>NUMBER STAFF MEALS SERVED</b>		<b>NUMBER VISITORS MEALS</b>		<b>TOTAL NUMBER SERVED</b>	
<b>DATE:</b>		BREAKFAST							
The use of this form is <b>MANDATORY</b> and		DINNER							
Required to be completed at the end of each meal.		SUPPER							
		<b>PORTIONS</b>				<b>LEFTOVERS</b>			
<b>MENU</b> (Including leftovers from previous meals to be served)		Number	Portion	<b>RECIPE NUMBER</b>	<b>SPECIAL INSTRUCTIONS TO COOKS</b>	<b>COOKING TIME TO START</b>	Amount	Amount	<b>COMMENTS</b>
	<b>PERSON ASSIGNED</b>	to					To Be	To Be	
		Prepare	Size				Used	Discarded	
<b>BREAKFAST</b>									
<b>DINNER</b>									
<b>SUPPER</b>									
<b>LUNCHES</b>		<b>LUNCHES ISSUED</b>			<b>REMARKS</b>				
Number to Prepare:		Squad	Number	Pick Up					
Made up by:		Number	Issued	Time					
Menu									
					<b>DISTRIBUTION</b>				
					Original - Forward to Steward IV (Food Service				
					Manager) responsible for your Institution/				
					Facility at end of work day each Tuesday.				<b>Signature of Supervising Steward</b>
					Carbon Copy - Retain for Institutional files.				

ALDOC FORM 103 (Revised 10-16-00)



[illegible]

AR700 – April 5, 2001

**TO: Food Services Specialist, Central Warehouse  
Draper Correctional Center**

**FROM: \_\_\_\_\_**  
**(Institution/Facility)**

**PERIOD: \_\_\_\_\_**  
**(Saturday-Friday)**

TYPE PERSONNEL		SAT	SUN	MON	TUES	WED	THUR	FRI	DAILY TOTALS
TOTAL MEALS	BREAKFAST								
FED INMATE	DINNER								
PERSONNEL	SUPPER								

TOTAL MEALS	BREAKFAST								
FED "ON DUTY"	DINNER								
EMPLOYEES	SUPPER								

OTHERS:	BREAKFAST								
(EXPLAIN)	DINNER								
	SUPPER								

*TOTAL OF	BREAKFAST								
CASH MEALS	DINNER								
	SUPPER								

WEEKLY TOTAL	BREAKFAST		*This form is to be forwarded to Central Warehouse by each Tuesday (end of work day). Signatures will be obtained for meals sold on reverse of this form. Cash collected will be turned in to the appropriate official and receipted for in format provided.						
OF MEALS FED	DINNER								
	SUPPER								

I certify that the totals contained herein are correct.

SIGNATURE \_\_\_\_\_

CHIEF STEWARD

ALDOC FORM 186 (REVISED 10-16-00)

**ALDOC FORM 179 FRONT PAGE**

**TO: CHIEF STEWARD**

**FROM:**

**Subject: Request for Bag Lunches and/or Special Meals as indicated:**

**1. It is requested that the following inmates be provided bag lunches/special meals as indicated:**

	N A M E		N A M E
1		36	
2		37	
3		38	
4		39	
5		40	
6		41	
7		42	
8		43	
9		44	
10		45	
11		46	
12		47	
13		48	
14		49	
15		50	
16		51	
17		52	
18		53	
19		54	
20		55	
21		56	
22		57	
23		58	
24		59	
25		60	
26		61	
27		62	
28		63	
29		64	
30		65	
31		66	
32		67	
33		68	
34		69	
35		70	

**( CONTINUED ON BACK )**

**ALDOC FORM 179 (REVISED 10-16-00)**

**ALDOC FORM 179 BACK PAGE**

**1. Continued**

	NAME		NAME
71		81	
72		82	
73		83	
74		84	
75		85	
76		86	
77		87	
78		88	
79		89	
80		90	

2. The above listed inmates are entitled to subsist at the expense of the State of Alaska. Personnel not authorized to subsist at State expense will be charged for their meal consumption and are as follows:

	NAME		NAME
1		11	
2		12	
3		13	
4		14	
5		15	
6		16	
7		17	
8		18	
9		19	
10		20	

3. The above requested meals will be consumed as: (Check one) Breakfast \_\_\_\_\_  
Dinner \_\_\_\_\_  
Supper \_\_\_\_\_

4. Pick Up Date \_\_\_\_\_ Time \_\_\_\_\_

**Acknowledgement for Receipt of Meals**

DATE \_\_\_\_\_

1. I certify that I have received \_\_\_\_\_ Meal(s) this date.

**SIGNATURE** \_\_\_\_\_

**DISTRIBUTION**

**Original** - Forward to Steward IV (Food Service Manager) responsible  
for your Institution/Facility at end of work day each Tuesday.  
**Carbon Copy**- Retain for Institutional files.

Employees who eat in the Institutional Dining Hall for the purpose of evaluating a meal, shall not be charged the employee meal fee, but must **complete this form in duplicate.**

U-UNSATISFACTORY

S-SATISFACTORY

G-GOOD

E-EXCELLENT

**INSTITUTION:**

**DATE:** \_\_\_\_\_

**TIME:** \_\_\_\_\_

MEAL CONSUMED:

☐ **BREAKFAST**

☐ **LUNCH**

☐ **SUPPER**

PREPARATION:

☐ U ☐ S ☐ G ☐ E

ADEQUACY OF PORTIONS:

☐ U ☐ S ☐ G ☐ E

APPEARANCE:

☐ U ☐ S ☐ G ☐ E

VARIETY:

☐ U ☐ S ☐ G ☐ E

FLAVOR:

☐ U ☐ S ☐ G ☐ E

EYE APPEAL:

☐ U ☐ S ☐ G ☐ E

HOT FOOD SERVED:

☐ **HOT** ☐ **COLD**

COLD FOOD SERVED:

☐ **HOT** ☐ **COLD**

APPEARANCE OF INMATE FOOD  
SERVICE PERSONNEL:

ATTITUDE OF INMATE FOOD  
SERVICE PERSONNEL:

SIGNATURE OF EVALUATOR:

JOB TITLE:

REMARKS (USE REVERSE SIDE IF NECESSARY)

ORIGINAL - Will be submitted to the Central Food Services Administration office along with the Steward's Daily/Weekly Meal report.

COPY - Will be kept on file in the institutional Food Service Steward's office for information and appropriate action, as necessary.

\_\_\_\_\_  
**STEWARD SIGNATURE**

**ALDOC FORM 180 (REVISED 10-16-00)**